

# Review of CDRR FY17 Application

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**Our Mission: To protect and improve the health and environment of all Kansans.**



# **Community of Health Promotion Team**

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# Administration and Management

- You will no longer need to provide information on your application on how you will meet the administrative and management components of your grant
- Be prepared to report progress on the requirements listed in the administrative and management section of catalyst
  - Enter progress in Catalyst at least monthly at the “workplan” level
  - Enter mid-year and end-of-year progress at the “strategy” level
  - Meet on a bi-monthly schedule with assigned Community Health Specialist – submit all progress to date into Catalyst prior to calls and site visits
  - Important: load passed policies into Catalyst and alert your CHS
    - Policies are tracked on our Catalyst policy monitoring tool

# Goal Area 1

## Strategies Overview

- D.1: PREVENT INITIATION OF TOBACCO USE AMONG YOUNG PEOPLE
  - Strategy D.1.1. Increased Restriction of Tobacco Use and Enforcement of Anti-Tobacco Policies and Programs in Schools and on College/University Campuses
  - Strategy D.1.3 Increased restriction and enforcement of tobacco product sales, availability, and use

# Goal Area 1

## Recommended Activities

- D.1.1.1. Increase the number of schools or school districts implementing 100% tobacco-free policies
- D.1.1.2. Increase the number of colleges/universities implementing 100% tobacco free policies
- D.1.3.1. Increase the number of communities implementing tobacco retail strategies to reduce youth tobacco initiation

# Goal Area 1

## Community Example

- Youth engagement
- Tobacco free policies
  - Comprehensive tobacco free school grounds policies
  - Cessation component in the tobacco policy
  - Inclusion of ENDS in policies
- Tobacco Retail Strategies
  - STARS retail assessments
  - Strengthening tobacco retail licensing and zoning laws

# Goal Area 2

## Strategies Overview

- D.2: ELIMINATE NONSMOKERS' EXPOSURE TO SECONDHAND SMOKE
  - Strategy D.2.1. Create tobacco-free policies

# Goal Area 2

## Recommended Activities

- D.2.1.1. Increase the number of multi-unit dwellings with smoke-free policies
- D.2.1.2. Increase the number of worksites with tobacco-free policies
- D.2.1.3. Increase the number of parks with smoke-free policies



# Goal Area 2

## Community Example

- Tobacco-free Worksites
  - Worksite Recruitment/Assessment
  - Policy Development
  - Policy Implementation
- Smoke-free Parks
  - Parks & Recreation
  - Policy Development
  - Advisory Board

# Goal Area 3

## Goal and Strategy Overview

- Promote quitting among adults and young people
  - Strategy D.3.1: Increase establishment and use of cessation services
  - NOTE: D.3.1.4 Promotion of the “Brief Tobacco Intervention” (BTI) must be incorporated into the workplan(s) that you choose in this Goal Area 3

# Goal Area 3

## Recommended Activities

- **Work plan D.3.1.1.** Establish cessation referral systems for healthcare providers
- **Work plan D.3.1.2.** Increase number of WorkWell Businesses with cessation referral systems that include insurance plans that reimburse for cessation services
- **Work plan D.3.1.3.** Establish cessation referral systems for mental healthcare providers
- **Work plan 3.1.4** Increase the number of healthcare health care provider organizations that integrate a systems, policy or environment change to include the KDHE "Brief Tobacco Intervention" (BTI) web-based provider training.

# Goal Area 3

## Community Example

Addressing Tobacco Use in Kansas - Usability Review Resources

### Addressing Tobacco Use in Kansas



#### Tools for Helping Your Patients Quit

Welcome to *Addressing Tobacco Use in Kansas: The Brief Tobacco Intervention*. The Brief Intervention is a technique that you can use to dramatically increase the likelihood that your patients will quit tobacco, and is effective in all types of health care organizations.

Throughout this training, you will learn about a wide variety of tobacco cessation resources and tools. Information about how to access these resources is located at the end of the training in the Appendix section.

CME Credits Navigation Instructions

**KanQuit!**  
1-800-QUIT-NOW (784-8669)  
KSquit.org

Click next to continue →

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# Goal Area 4

## Strategies Overview

- D.4: Increase access to healthy foods and physical activity
  - D.4.1: Increase support for policies and programs that expand access to healthy foods and physical activity in worksites and communities
  - D.4.2. Increase local food production and sourcing
  - D.4.3. Increase access to breastfeeding friendly environments
  - D.4.4. Increase the number of communities that adopt and implement healthy community design principles

# Goal Area 4

## Recommended Activities – Healthy Foods

- **Workplan D.4.1.1:** Promote and support healthy food systems through food system assessments, food policy councils, community planning processes and/or promotion, pricing and placement strategies
- **Workplan D.4.1.2:** Increase the number of worksites that implement the WWKS framework for nutrition and/or physical activity by recruiting worksites to the trainings and providing ongoing technical assistance
- **Workplan D.4.1.3:** Promote the adoption of food service guidelines/nutrition standards that also include sodium. Target locations may include venues where food is provided or sold including, but not limited to, worksites, hospitals, schools and/or community vending, cafeterias, snack bars and meetings or events (e.g. conferences)

# Goal Area 4

## Recommended Activities – Healthy Foods

- **Workplan D.4.2.1:** Establish new, and expand existing, farmers markets, including the promotion and support of access to and use of EBTs-SNAP and SFMNP at farmers markets
- **Workplan D.4.2.2:** Promote and support farm-to-school and farm-to-institution programs and policies
- **Workplan D.4.2.3:** In counties with the Senior Farmers' Market Nutrition Program (SFMNP), promote the SFMNP to farmers and seniors, collaborate with local check distribution agencies to increase county check redemption rates, and engage seniors in targeted nutrition education opportunities
- **Workplan D.4.3.1:** Ensure workplace compliance with federal lactation accommodation law

# Goal Area 4

## Recommended Activities – Physical Activity

- **Workplan D.4.4.1:** Adopt and/or implement/enforce Complete Streets or equivalent policies in combination with community awareness activities and presentations to local boards of health, business organizations and planning commissions on the evidence base and opportunities to impact health
- **Workplan D.4.4.2:** Adopt and/or implement/enforce master bike/walk transportation plans in combination with community awareness activities and presentations to local boards of health and planning commissions on the evidence-base and opportunities to impact health
- **Workplan D.4.4.3:** Form or strengthen bike/walk planning advisory committees to coordinate local community design policy efforts and awareness activities



# Goal Area 4

## Community Example

- Creating a bike/walk planning advisory committee
  - Master bike/walk transportation plans
  - Complete Streets policies
- Creating a food policy council
  - Nutrition guidelines → School districts → healthier food concessions
- Promoting worksite wellness programs that support breastfeeding initiatives
  - Engage Human Resource staff AND worksite staff
- Establishing a SNAP/EBT-capable farmers market in an underserved area
  - Partner with Housing Authority on market location
  - Sign-on with Market Match to provide Match dollars for SNAP recipients

# Goal Area 5

## Strategies Overview

- **Goal Area 5:** Increase the ability of those with chronic disease to manage their condition(s)
  - **Strategy D.5.1:** Increase access to Chronic Disease Self-Management Education (CDSME) programming
    - **Workplan D.5.1.1:** Promote and coordinate the expansion of CDSME programming opportunities and their reach

# Chronic Disease Self-Management Action Steps

- Identify a local CDSME program coordinator.
- Engage **one or more organizations** to partner with. Identify a champion.
- Distribute educational materials
- Earned media
- Recruit **one or more healthcare providers** as referral partners.
- Identify **one or more persons** to attend Fidelity Check Training
- Coordinate local workshop recordkeeping

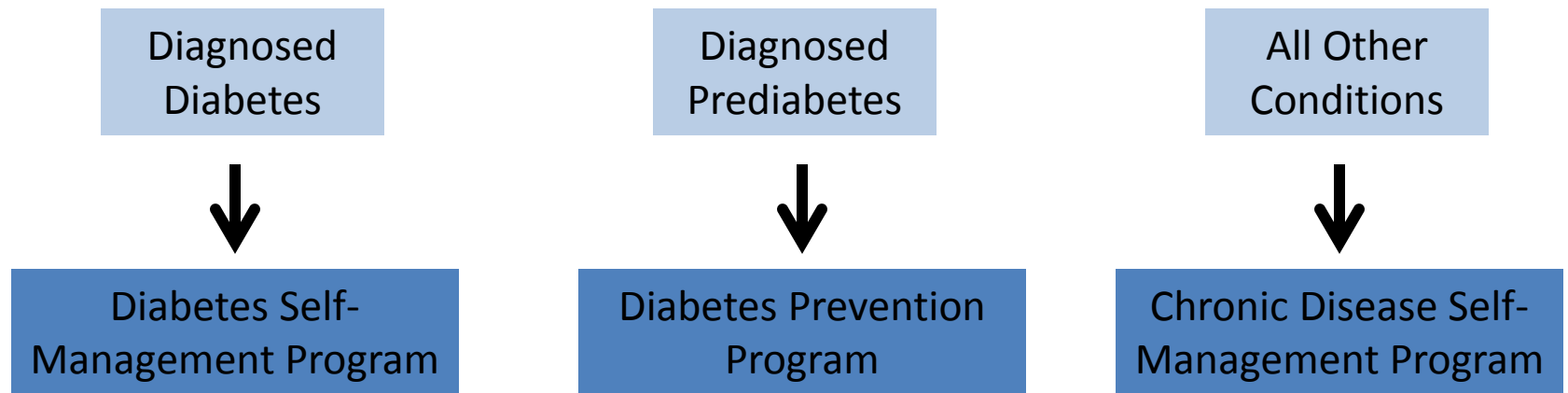
# Chronic Disease Self-Management Recommendations

- One organization at a time
- Trackable referral process with providers
- Consistent workshops – locations and schedule

# Chronic Disease Self-Management Community Example

1 city, 3 locations, CDSME + DPP

Champions coordinating & Tracking referrals



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# Data & Information

- Community assessment (CHANGE Tool)
- Collect and submit local policies as requested
- Submit surveys to TUPP epidemiologist for review at least two weeks in advance of survey administration

# Data & Evaluation

## Performance Measures

- Each specific work plan includes required performance measures
- Example: Workplan D.1.1.1
  1. Number of school age youth who participate in tobacco-use prevention activities
  2. Proportion of schools or school districts with comprehensive tobacco free school grounds policies (provide both the total number of schools or school districts and the number of schools or school districts with comprehensive tobacco free school grounds policies).
  3. Proportion of school aged youth enrolled in a school or school district with comprehensive tobacco free school grounds policies policies (provide both the total number of school age youth enrolled in schools or school districts and the number of students enrolled in schools or school districts with comprehensive tobacco free school grounds policies).
- For all **“proportions”** report both numerator and denominator as well as overall proportion.

# Data & Evaluation

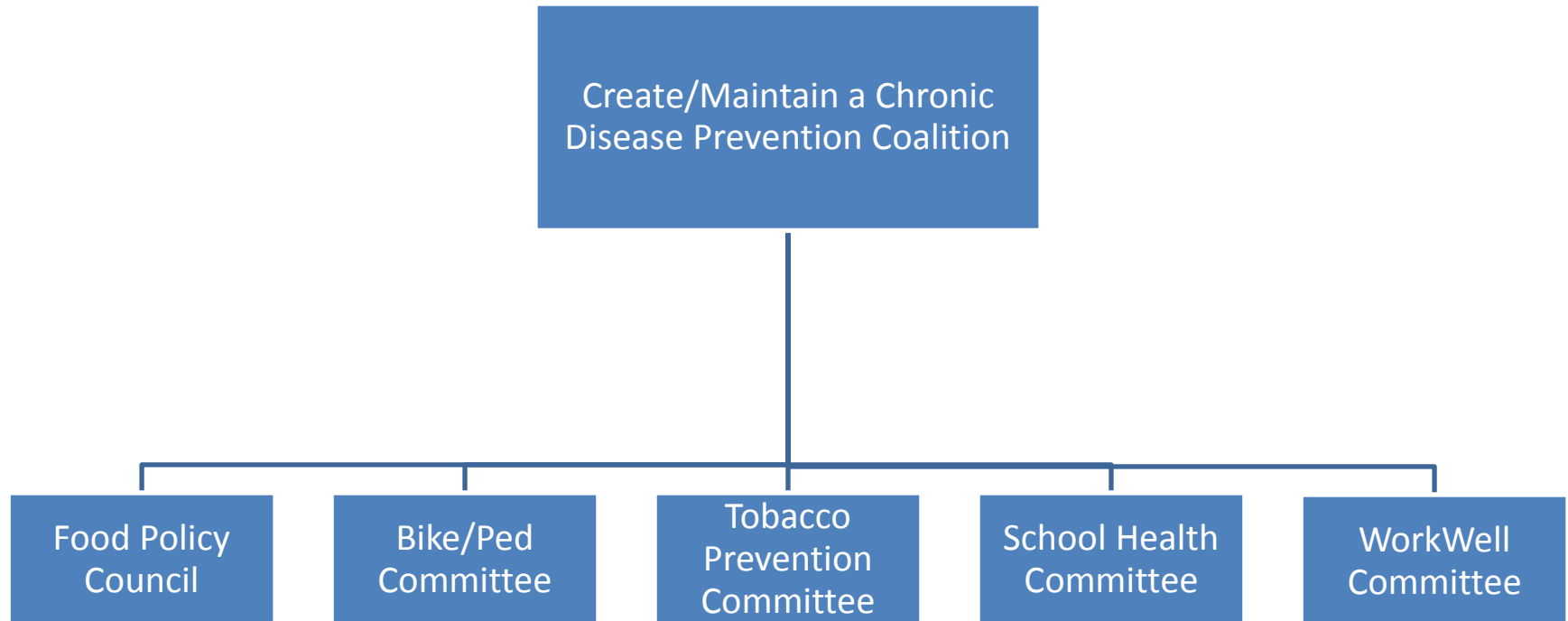
## Performance Measures

- Special Case: D.4.1.1: Required Performance Measures (include performance measures that align with selected approaches for D.4.1.1):
  1. Number of newly completed food system assessments.
  2. Number of jurisdictions covered by newly formed and/or publicly appointed food policy councils.
  3. Number of updated community comprehensive plans that contain language to increase access to healthy foods.
  4. Number of retail venues in the community or jurisdiction and community venues that promote healthier food access through increased availability and improved pricing, placement and promotion.
  5. Number of adults who have access to retail venues and community venues that promote healthier food access.
- Additional performance measures may be proposed if useful to grantee



# Partnerships

## Strategies Overview



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# Partnerships

Expanding our Reach – Coalitions with multi sector participation from community leaders



# Partnerships

## Required Activities

- Coalition that focuses on tobacco strategies and meets at least quarterly
- Complete coalition assessment as needed or recommended by CHS
- Promote and monitor partner attendance at coalition meetings
- Recruit additional coalition members to ensure different sectors are represented in your coalition
- Reach out to your CHS to enhance coalition planning, capacity and infrastructure
- Provide TA & Feedback



# CDRR Coalition Self-Assessment

## Partnerships

- Designed to identify a coalition's strengths and weaknesses
- Anonymous
- The CDRR Outreach Coordinator administering the assessment will collect these when you are finished and report the results to the members of the coalition
- Once collected and analyzed your group's responses will provide a general picture of your coalition's stage of development
- Survey results may illuminate areas where technical assistance, training or other support may be needed

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# Communications Strategies Overview

Increase  
knowledge

Generate  
buy-in

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# Communications Recommended Activities

Increase  
knowledge

KanQuit!

CDC  
*Vital*signs™

**KICK BUTTS DAY**  
**#iKickButts**

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AD ASTRA PER ASPERA  
**Kansas**  
Department of Health  
and Environment

# Communications Recommended Activities

Generate  
buy-in



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Question?





**[www.kdheks.gov](http://www.kdheks.gov)**

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